

DEPARTMENT OF HOMELAND SECURITY U.S.C.G. AUXILIARY  ANSC 7005A (05-04)	<b>AUXILIARY PILOT/AIR CREW QUALIFICATION</b>	<b>TYPE OF REPORT</b> <input type="checkbox"/> ANNUAL REPORT 20____ UPGRADE (OR CHANGE) REPORT 20____ <input type="checkbox"/> NEW (OR INITIAL) REPORT 20____			
<b>SECTION I - PILOT / AIR CREW DATA</b>					
MEMBER ID	MEMBER'S LAST NAME, FIRST NAME, MIDDLE INITIAL AND ADDRESS	PILOT'S LICENSE NUMBER			
DIST/DIV/FLOTILLA		Issue Date:			
<b>SECTION II - PILOT/AIR CREW REQUIREMENTS CHECK OFF LIST (COMDTINST M16798.SERIES)</b>					
YES	NO	ITEM	YES	NO	ITEM
		1. Pilot, Types & Ratings: <span style="float: right;">See Instructions</span>			9. Initial Auxiliary flight Hour Requirements; Total Flight Hours, PIC:
		2. FAA Medical, Class: _____ Date: _____			10. Night Currency IAW FAR 61.57
		3. Instrument Currency IAW FAR 61.57			11. Passenger Currency IAW FAR 61.57
		4. Aviation Safety Workshop: _____ Date: _____			12. FAA Flight Review, IAW FAR 61.56 Date: _____
		5. Egress Training; Date: ____/____/____ Water Survival; Date: ____/____/____			13. Annual Flight Requirement (24 hrs PIC last 12 months)
		6. Air Operations Training Test Pass - <90% Air Crew (A) <input type="checkbox"/> Pilot (B) <input type="checkbox"/> Year(s): _____			14. 6 Auxiliary Missions and 12 mission flight hrs (last 12 Months)
		7. Area Familiarization Flight, Area and Date: _____			15. Auxiliary Flight Check/SAR Check: Date: _____
		8. Minimum 10 Mission Flight Hours (Obs) / 2 Missions as Trainee (Pilot): _____			16. Certified Flight Instructor Rating
<b>SECTION III - EXAMINER'S CERTIFICATION</b>					
RECOMMENDED FOR: <input type="checkbox"/> OBSERVER <input type="checkbox"/> AIRCREW <input type="checkbox"/> CO-PILOT <input type="checkbox"/> FIRST PILOT <input type="checkbox"/> AIRCRAFT COMMANDER			This member has completed all necessary requirements and is recommended for the qualification indicated.  <div style="display: flex; justify-content: space-between;"> <div>SIGNATURE OF EXAMINER _____</div> <div>DATE _____</div> </div>		
Applicant's Signature _____			MEMBER NUMBER _____ DISTRICT/DIVISION/FLOTILLA _____		
<b>SECTION IV - DISTRICT STAFF OFFICER - AVIATION (DSO-AV) ENDORSEMENT</b>					
This report has been checked and has been filled out in accordance with current instructions.					
SIGNATURE OF DSO-AV					DATE
<b>SECTION V - DIRAUX ENDORSEMENT</b>					
MEMBER IS DESIGNATED: Observer-O; Air Crew-C; Co-Pilot-CP; First Pilot-FP; Aircraft Commander-AC <div style="border: 1px solid black; width: 80px; height: 20px; float: right; margin-top: 10px;"></div>					
SIGNATURE OF DIRAUX:					DATE:
AUXDATA ENTRY COMPLETED <input type="checkbox"/>					DATE:
Previous Editions are Obsolete					

**Instructions for Auxiliary Pilot/Air Crew Qualification Form ANSC 7005A (05-04)**

The Air Operations program requires initial qualification and annual renewal of aviation qualifications. This form provides a check list for initial qualification checks and annual currency (as required) for all **Pilots, Observers and Aircrew**.

In the upper right of the form, check TYPE OF REPORT, Annual, Update (or Change) or New (or initial). Update (or Change) should be used whenever pilot qualifications are modified or a pilot qualifies for a new Auxiliary rating. Fill in the appropriate year.

Section I –Pilot / Air Crew Data

The applicant should fill in the appropriate information:

MEMBER NUMBER - Enter the applicant's ID number. Enter the District/Division/Flotilla Number.

MEMBER'S LAST NAME, FIRST NAME, AND MIDDLE INITIAL and ADDRESS - Enter the applicant's last name, first name and middle initial. Enter the full address and ZIP code.

PILOT'S LICENSE NUMBER - For pilot applicants, enter the Pilots License Number and date of issue

Section II –Pilot / Air Crew Requirements and Check-Off List

This section will be completed by the examiner who must be a specially designated Aircraft Commander or Flight Examiner.

<u>FAA Pilot Types:</u>	<u>FAA Ratings:</u>
PRIV Private Pilot	INST Instrument
COMM Commercial Pilot	MEL Multi-Engine Land
ATP Air Transport Pilot	MES Multi-Engine Sea
	RC Rotor Craft
	SEL Single Engine Land
	SES Single Engine Sea

**Questions 4, 5, 6, 7 and 8**, outlined in a heavy box, apply to all candidates, pilot, observer and aircrew; however, these are the only requirements on the check-off list for initial and annual observer qualification.

Section III –Examiner's Certification

RECOMMENDED FOR - The examiner will enter the applicable level of pilot qualification the reporting member has attained and that is recommended to the DIRAUX for certification.

EXAMINER SIGNATURE and MEMBER NUMBER - The seven digit Inspector Member Number will be entered along with the Inspector's District/Division/Flotilla numbers.

MEMBER'S SIGNATURE – The applicant should sign the form indicating an understanding of the findings of the examiner and attesting to those requirements listed.

PRIVACY ACT STATEMENT

1. Authority: 14 USC 826 and 827
2. Principal Purpose: To provide a means of selection and acceptance of personnel as U.S. Coast Guard Auxiliary qualified air crew member
3. Routine Use: Retained by directors of Auxiliary and cognizant USCG commanders as a record of which personnel have been accepted by the director as U.S. Coast Guard Auxiliary air crew members.
4. Disclosure: Voluntary, however, the detailed information requested on this form enables the Coast Guard to select qualified personnel as Coast Guard Auxiliary air crew members. Failure by the member to provide all or part of the information may prevent their acceptance of the aircraft as a Coast Guard Auxiliary air crew member.